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Notice to Medicaid and BadgerCare Recipients and SeniorCare Participants

Starting March 15, 2004, Wisconsin Medicaid and BadgerCare fee-for-service recipients and all SeniorCare participants will be required to have prior authorization for brand-name anti-depressant drugs called Selective Serotonin Re-Uptake Inhibitor (SSRI) drugs. Prior authorization means your pharmacy has been granted approval by Wisconsin Medicaid for you to receive the drug.

Prior Authorization is not required for:

- Fluoxetine (generic Prozac)

For those patients newly prescribed SSRIs, fluoxetine must be tried first unless you have a medical condition that does not allow you to use fluoxetine. If you tried fluoxetine and it did not work for you or you are allergic to fluoxetine, you can then receive a prior authorization for the brand name SSRIs. Prior authorization is not required for fluoxetine.

The brand name drugs that require Prior Authorization are:

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|--------------|-----------------|
| • Celexa | • Paxil CR |
| • Lexapro | • Pexeva |
| • Paroxetine | • Zoloft |
| • Paxil | • Prozac Weekly |

Patients currently stabilized on any of the brand name drugs listed as requiring prior authorization will be given prior authorization to remain on that drug. Pharmacists will still be required to follow the prior authorization request procedures for those patients currently stabilized on a brand name SSRI drug to obtain a prior authorization.

To get a prior authorization for a brand name SSRI drug your pharmacist will be asked a series of questions to get the following information:

- If you are already taking a brand name SSRI;
- If you already tried fluoxetine and it did not work for you;
- If you have had a bad reaction to or are allergic to fluoxetine; or
- If you cannot take fluoxetine because of another medical condition you have.

You or your doctor will need to give this information to your pharmacist for them to get approval.

Included is a link to a worksheet to help you, your pharmacist and your doctor have the answers to the prior authorization questions completed before submitting a prior authorization request.

The worksheet can be downloaded from our website at

<http://dhfs.wisconsin.gov/medicaid4/ssri/hcf11064.pdf>

The “Pharmacy” side of the worksheet is for your pharmacist to use. You do not need to fill out the “Pharmacy” side of the worksheet. If you need a prior authorization for a brand name SSRI, you may want to ask your doctor to fill out the “Prescriber/Pharmacy” side of the worksheet for you to take to your pharmacy. Your doctor may also fax the form to your pharmacy or may call your pharmacy with the information. You are not required to use or keep this worksheet.

The Department of Health and Family Services has made this policy effective only after extensive deliberation that included consumer input and testimony. The Medicaid Prior Authorization Advisory Committee that recommended this policy was comprised of doctors, pharmacists, consumers and consumer advocates.

Questions? Please call Recipient Services at 1-800-362-3002.